

Date of Application	1:		
Date of Proposed E	vent:		
	nt:		
APPLICATIONS	MUST BE COMPLETE	AND INCLUDE T	THE FOLLOWING
☐ Application for I	Rental Agreement	☐ Event Site	e Plan
	\$25/non-refundable	☐ Event Age	enda/List of Activities
Note:			
<ul> <li>Permit applies</li> <li>An application of the signed by the sig</li></ul>	ion for Special Use shall note Department.  ion for Special Use shall n	to the Department of become a permit of become a permit approval will not be	at least six weeks prior to event until it has been approved and until it has been approved and be finalized without submittal of fees/charges/deposits.
Applicant Informa Contact Name:	ation		
Address:			
City, State, Zip:			
Contact Email Add	ress:		
Organization Email	and URL:		
Organization Phone	e Number:		
<b>Event Information</b>	<u>1</u>		
Name of Event:			
Type of Organization	on:		
☐ Governmental	☐ Non-Profit Tax ID#	<u> </u>	☐ Private User
Type of Event:	☐ Concert ☐ Cultu	ral	☐ Entertainment
	☐ Fundraiser ☐ Parad	1	☐ Walk/ Run



**NOTE:** All Events: A map detailing placement of event (site map) will be required for all events. GIS maps are available on line at <a href="http://bloomington.in.gov/maps/">http://bloomington.in.gov/maps/</a>. A copy of your proposed route must be attached to this application. If you are requesting that any public street be partially closed/blocked off, contact the City of Bloomington Economic and Sustainable Development Department 812-349-3700.

1.	Is this event open to the public? $\square$ Yes $\square$ No						
2.	Event Description:						
3.	Requested date(s	Requested date(s) and time(s) for event:					
	Event Activity	Setup Date/Time	Event Starting Date/Time	Event Ending Date/Time	Dismantle Complete Date/Time		
4.	Is there a designation	ated date for incle	ement weather? (rain	n date) 🗆 Yes 🗖 N	No		
	•						
5.	5. Total number of anticipated participants (i.e. volunteers, spectators, participants, etc.):			ticipants, etc.):			
	Total: Peak Attendance: at time:						
6.	Requested Event Location: Park Name						
7.	Facilities in Park (e.g. shelter, park, grounds, etc.)						
	If event is on park grounds or more than one facility is being used, please provide map						
showing parking, activity venues, first aid, etc.							
8.	How do you plar	n to publicize this	proposed event?				
	If available, please attach a copy of the proposed publicity plan or flyer. Please list event						
	website if available.						
	NOTE: DO NOT PRINT FOR PUBLICATION UNTIL YOUR EVENT IS						
APPROVED BY CITY OF BLOOMINGTON PARKS AND RECREATION.				REATION.			
9.	Will any signs, b	anners or flyers b	be hung or posted?	☐ Yes ☐ No			
	If yes, describe the proposed locations of the banners, etc.						
	NOTE: Due to city ordinances regarding signage, additional permission may be required to						
	hang banners/signs in advance of the event. Contact the City of Bloomington Planning						
	Department at 81			•			



Item		Size	Quantity
NOTE TO 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 4 11		C 1 1: 1
NOTE: Tents may not be staked without prior			
including tents, umbrellas and signs, must be j			
b. If contracting with a company that will be	providing any o	of the above, I	list information
below:			
Company Name:	Contact Person:		
Address:	Telephone Num	ber:	
Company Name:	Contact Person:		
Address:			
1. Does your event require an Indiana Departmen			
Entertainment Permit? ☐ Yes ☐ No		•	
<b>NOTE:</b> It is your responsibility to contact the	Department of 1	Homeland Se	ecurity to see if
your event requires an Amusement and Entert			•
Department of Homeland Security can be read			
https://www.in.gov/dhs/2795.htm.	ned at (317) 23.	2-2222 Of Offi	inic at
	. f	h amaaia1 maa	da. (madrima
2. Please list accommodations you are providing	-	n speciai need	us: (parking,
transportation, accessibility)			
3. Will donations/contributions be accepted during	ng this event?	☐ Yes	☐ No
a. If yes, please explain how these donation	s will be generat	ted or collecte	ed.
4. Will there be an admission charge to attend/pa	articipate?	☐ Yes	☐ No
a. If ves. Type Fee(s):	Fee Amour	it:	



15. Do you plan to sell, distribute or give away refreshments	s and/or merchandi	se
(i.e. food, beverage, T-shirts, CD's, Art, etc.)?	☐ Yes	□ No
a. If yes, List Type and Number of Booths:		
Type	Quantity	
NOTE: Bloomington Parks and Recreation will charge a each vendor/booth selling food/merchandise and/or any a selling to the large and the selling food/merchandise and/or any and the selling food/merchandise and selling food/merchandise an		=
collected while on park property.  NOTE: A temporary Food permit must be obtained from Department if you are planning to sell food (i.e. hot dogs profit organization must show proof of non-profit status information, contact the Monroe County Health Department hand washing station must be provided (portable or in fa food.	s, nachos, candy, e when applying for nent at 812-349-25	tc.). Any non- permit. For more 43. A toilet and
16. Do you plan to sell or distribute alcohol?  a. If yes, explain:	☐ Yes	□ No
NOTE: Alcohol sales in City-owned parks, trails, and sp Board or Parks Commissioners and the Director of Parks "2020 Guidelines for Requesting/Approval of Alcohol S 17. Will there be displays, literature, or other types of solicit 18. Are you providing additional portable toilets for your even	s and Recreation. Fales with an Approtation?   Yes	Please see the
a. If yes, how many? Location (show or <b>NOTE:</b> The City of Bloomington Parks and Recreation (one) rest room facility for every 500 participants. If numavailable, it will be the organization's/event organizer/s necessary number. Proof of payment will be required with b. Do you request restrooms access at the Allison-Jukel ☐ Yes ☐ No	n map): Department requirember needed exceet responsibility to act the application.	es you to have 1 ds what park has equire the enter?
NOTE: There is a minimum charge of \$35/hr to open the For other uses of the Alison Jukebox Community Center c. Do you request restrooms access at the Switchyard P NOTE: There is a minimum charge of \$35/hr to open the restroom use. For other uses of the Switchyard Park Pavil	r additional fees ap Park Pavilion?	ply. Tes □ No Pavilion for



19. Please describe how you plan to remove tras	h from the event site:
Person Responsible:	
Contact Number:	
Security/Safety:	
20. What are you plans for severe weather?	
21. Do you have a scheduled rain date or locatio a. If yes, please list:	
22. Who will be the on-site person responsible for	
812-349-3742 or marlerh@bloomington.in.g	
Contact Person:	
23. What are your plans for providing security, t	raffic and/or crowd control:
Contact Person:	Contact Phone Number:
24. What are your parking plans? Overflow Park	ing?
25. What are your plans for providing emergenc	y/medical services?
<b>Event Entertainment:</b>	
26. Do you plan on providing musical entertainma. If yes, describe:	nent for this event?
27. Will any type of sound amplifying equipment event? ☐ Yes ☐ No	t or devices be used in conjunction with this
a. If yes, describe:	
Type	Quantity
b. If musical entertainment is used, please I Contact Person:	ist contact information for sound technicians:
Company Name:	Contact Phone Number:



	Bloomington's Ordinances	regarding acc	eptable noise levels. (Please	refer to the C	ity's
	Noise Ordinance, Title 14, O	Chapter 14.09	of the City of Bloomington	n Municipal Co	ode.) It is
	the event organizer's/applica	ant's respons	ibility to be in compliance v	vith all federal	and state
	copyright laws.				
28.	Do you plan to provide othe	er entertainme	ent for this event?	☐ Yes	☐ No
	a. If yes, attach planned pro	ogram:			
29.	Events with animals require	additional co	onsiderations and Animal Co	ontrol approva	l. Are you
	planning to pursue permission	on for animal	ls at your event?	☐ Yes	☐ No
30.	Are you providing a generat	tor as a powe	r source?	☐ Yes	☐ No
31.	Electrical Needs:				
32.	Do you plan on grilling?	1 Yes	□ No		
33.	NOTE: Grilling in parks is Parks Department. Personal grease on Park property is n cleaning and removal plus la allowed. Are there any special provis	grills of any ot allowed. It abor will be r	kind are not permitted. The f either is found after an everetained from the damage de	dumping of hont, the amount posit. Fire-pits	ot coals or t for s are not
	• • •	-	□ No		
	a. If yes, please list:				

**NOTE:** The sponsoring organization's Event Coordinator must comply with all City of

By signing and submitting this application, the permit applicant agrees to abide by the rules and regulations of the Department of Parks and Recreation including, but not limited to, the conditions as stated on this application and the City of Bloomington Parks and Recreation Department Rental Agreement.

#### **Please Read Carefully:**

I, a duly authorized representative of the applicant, hereby affirm that the submitted information is true and correct to the best of my knowledge. As such, I have been authorized by the applicant to apply for this permit and have read, understand and agree to comply with all rules concerning the use of a Bloomington Parks and Recreation park. The applicant agrees that while renting the park, the applicant will not exclude anyone from participation in, deny anyone benefits of, or otherwise subject anyone to discrimination because of that person's race, color, sex, religion, creed, sexual orientation, national origin or ancestry, age or handicap. Under this Special Event



Permit, the applicant assumes all responsibility for proper conduct in the park as outlined above,			
including assuring there is no consumption of	alcoholic beverages.		
I, on	behalf of the permit applicant, shall agree to		
	the City of Bloomington, its employees, officers,		
described herein. This includes claims for personal injury, property damage, and/or any other types of claim which may arise from these activities, whether such claims may be brought by the permit applicant or any of its agents, or by any third party.			
I have read this release and understand all of i voluntarily.	ts terms. I agree with its terms and sign it		
Signature	Date		
Due with Application			
☐ Application Fee: \$25/non-refundable	\$		